

(1) PLACE OF BIRTH

County of Orangeburg  
Township of 2nd

**CERTIFICATE OF BIRTH**  
STATE OF SOUTH CAROLINA.  
Bureau of Vital Statistics  
State Board of Health

File No.—For State Registrar Only  
**40585**

Inc. Town of ..... Registration District No. 3619 Registered No. 42  
(For use of Local Registrar)  
City of ..... (No. .... St.; .... Ward)  
(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Julia Belle Bonnet If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? girl (4) Twin or Triplet? ..... (5) Number in order of birth 3 (6) Are Parents Married? Yes (7) DATE OF BIRTH Oct. 3, 1911  
(Name of Month) (Day) (Year)

**FATHER.**

(8) FULL NAME John Bonnet  
(9) PRESENT POSTOFFICE OF FATHER Orangeburg S.C.  
(10) COLOR OR RACE colored (11) AGE AT LAST BIRTHDAY 28 (Years)  
(12) BIRTHPLACE Orangeburg S.C.  
(13) OCCUPATION farmer  
(14) Number of children born to mother, including present birth 3

**MOTHER.**

(14) NAME BEFORE MARRIAGE Rosa Tell Simley  
(15) PRESENT POSTOFFICE OF MOTHER Orangeburg S.C.  
(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 26 (Years)  
(18) BIRTHPLACE Orangeburg S.C.  
(19) OCCUPATION farmer's wife  
(20) Number of children of this mother now living, including present birth 3

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\***

(22) I hereby certify that I attended the birth of this child, who was alive at 3 a M., on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) S. L. K. K. K.  
(24) State whether Physician or Midwife midwife (25) Address of Physician or Midwife Orangeburg S.C.

Given name added from a supplemental report

(26) Witness ..... (Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Nov. 1, 1911 (28) W. H. Duke Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.

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